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7590

05/06/2004

Arthur Jacob
25 East Salem Street
P.O. Box 686
Hackensack, NJ 07602

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Arthur Jacob, #19,702 (Depositor's name)
Arthur Jacob (Signature)
JUNE 23, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/993,527	11/14/2001	Robert L. Newell	A-00.101.1	8399

TITLE OF INVENTION: APPLICATOR BRUSHES AND METHOD FOR APPLYING MASCARA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	08/06/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
MANAHAN, TODD E	3732	132-218000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ corporation or other private group entity ☐ government

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- ☒ Issue Fee
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☐ Advance Order - # of Copies _____

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(Date)

Arthur Jacob 6/23/04

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06/24/2004 AWONDAF2 00000052 502221 09993527

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